STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 12 2018

PLEASE PRINT

	Mila No al	100 1/1	NEW HAMPSHIRE DEPARTMENT OF STATE
I. Name of Lobbyist	(s) Mike Dennehy/	HILX KOUTTOU	lba.S
II. Name of lobbyist	's partnership, firm or corporation, if	any:	
	_		
(N _ε	Dennehy & Bo	ouley, LLC	
Business Address: (5	17 Depot	Street .	
Business Address: (§	Concord, N	H 03301	(Zip Code)
()(Telephone)	603-228-	1601 -	
III. This statement coreportable expense to	overs: (Choose one – file separate reporansactions which are not attributable	orts for each client, OR you me to any one client).	ay file a separate report for
All reportable tran	sactions occurring in the months prior to	o the reporting date relative to the	he following client:
	Concard Hospi	to 1	·
	(Full Name of Client as it appears on the L	obbyist Registration Form)	
<u>OR</u>			
unrelated to any partic	sactions by the lobbyist (including the localization)	bbyist's family), or the lobbying	g firm listed below which are
IV. Date of Report	April 26, 2017 🗌	July 26, 2017 🗌	
Reports cover: activ	ity from date of registration to 3/31/17	activity from 4/1/17 to 6/30/17 January 31, 2018	
	October 25, 2017 activity from 7/1/17 to 9/30/17	activity from 10/1/17 to 12/31	/17
V. There have been If this box is checked, Concord, NH 03301.	no fees received and no reportabl complete just this form and submit it to t	e transactions made since t the Secretary of State's Office, S	he last report. State House, Room 204,
	al reports are attached:		
	ed fees or made expenditures, you must		
La If you have paid a Expense Reimburseme	n honorarium or reimbursed expenses, y	ou must file Addendum B – Re	port of Honorariums or
☐ If you, your firm,	or your family has made political contrib	outions, you must file Addendu	m C- Political Contributions
Sworn Statement/Aff I have read RSA\15, R and complete to the be (Signature of lobbyist)	SA 15-B, RSA 14-C and RSA 664 and hast of my knowledge and belief.	nereby swear or affirm that the f	

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STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

1778 to 1770 t	
I. Name of Lobbyist(s) Mike Dennehy Alex	Koutroubas
II. Name of lobbyist's partnership, firm or corporation, if any:	
Dennehy & Bouley LCC (Name of partnership, firm or corporation)	
III. Name of Client Concord Hospital	Date04 05 18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The grereduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a)\$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 36,000
c) Total of all fees received to date (Add lines a and b)	c)\$ 44,000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid expenses; (b) the aggregate total of a expenses; (b) the aggregate total of a expense paid total of a expense paid to the person of the state of \$25.00 or less); and the period of greater than \$25.00 for the of greater than \$25, purchase of the expense reimbursement, or political points and the period of greater than \$25, but not greater than \$
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	4/1/18
(Signature of lobbyist)	(Daye)
Mike Dennehy	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Dennehy & Boyley US
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): (a) Cord Hospital
Date of Report (check one):
April 25, 2018
January 31,2018 H (Q42017)
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
alle / Me 4/3/2018
(Signature of lobbyist) (Date)
Alex Koutroubas
(Print Name of lobbyist)